MINUTES

Standardization Committee
Friday, February 14, 2003 @ 11:00 am
Medical Board Room (2C116)

PRESIDING
Eldridge, Larry, OD

PRESENT
Bordner, MaryAnn, RN, HES
Brown, Dennis, CCMD
Axelroad, Karen Chandler RN, Nsg
Ennis, Bob, MMD (for Gregg Capunitan)
Fahey, Barbara, RN, MMD
Feigenbaum, Kathy, RN, Nsg.
Fuller, Barbara, RN, Nsg
Geyer, Christopher, RN, Nsg
Goldspiel, Barry, Pharmacy
Gutierrez, Debbie, RN, Nsg. (Guest)
Lang, David, MD
Martinez, Linda, RN, Nsg (for Linda Tarr)
Price, Beth, RN, Nsg
Sparks, Mary, RN, Nsg
Taylor, Jerry, RN, MMD
Woolery-Antill, Myra, Nsg

APPROVAL OF MINUTES
The minutes of the December 13, 2002 meeting were approved as written.

OLD BUSINESS
Patient Slippers
Mr. Primas presented two candidate slipper products for consideration: (1) TERI-TREDS™ is a latex-free non-skid slipper with a terry upper and a flexible sole. The slipper is available in children's and adult sizes. (2) PILLOW PAWS® is a latex-free hard sole slipper with a cotton/nylon upper and a polyvinyl chloride sole. The slipper is color-coded by size. The available sizes are toddler, child , youth, junior and adult (small, medium and large for adult). Mr. Primas noted that the slippers were comparable in price. Committee members expressed a preference for PILLOW PAWS®—the sole seems more puncture-resistant; the slipper fabric seems less restrictive; the slipper seems more comfortable. A motion was made, seconded and passed to add PILLOW PAWS® into HFCD inventory. Mr. Primas explained that slippers are supplied by HFCD and that the current slipper supply would be depleted before using the new product. Mr. Primas stated that HFCD would coordinate with MMD Nurse Consult Service upon arrival of PILLOW PAWS® for staff education and product implementation. Use of PILLOW PAWS® will be monitored via staff feedback and ORS for a six-month period, and then, if no unusual difficulty occurs, by ORS after a six-month period.

IV Labels
Ms. Fahey and Mr. Goldspiel distributed a handout that summarized the status of the three labels under consideration. The IV Bag label and the IV Tubing Change label have received full approval and are expected to be in inventory by early March 2003. The IV Bag label is a new label. Ms. Fahey noted that the Clinical Quality Committee suggested that Nursing and Patient Care Services consider developing a procedure to ensure consistent use of this label. The IV Tubing Change label will replace the current 24-Hour IV Tubing label and the current 72-Hour IV Tubing label. A Product Update will be published when these products are available.

Ms. Woolery-Antil noted that 13W is piloting an IV Tube Change Label program in which each day of the week has a distinct color. Ms. Woolery-Antil reported acceptance and full compliance with this pilot. The Committee expressed concern about apparent non-standardization of IV Tube Change Label practices and requested a summary report upon completion of the pilot.

Ms. Fahey and Mr. Goldspiel reported that the Clinical Quality Committee identified a need for additional information. Ms. Laura Lee will assemble a Clinical Quality Committee work group for this project. To date the work group has not been assembled. Updates on this project will be provided when available from the Clinical Quality Committee work group.

Alaris Medley IV Pump Project

Ms. Taylor provided updates on the Alaris Medley IV Pump Project:

- An addition 67 devices have been delivered. Each nurse manager/ supervisor has received an electronic asset management list that includes all devices by device type (brain or channel), device serial number and device assigned location. Each nurse manager/ supervisor is responsible for their assigned inventory. Infusion devices are cleaned in their assigned locations by HFCD; a paper money band attached to an infusion device is the marker that the infusion device is clean and ready for use. 4W and 12E/TU identified a need for additional infusion devices, conducted a needs assessment with MMD Nurse Consult Service, and were assigned additional infusion devices. In the event that a clinical area identifies a need for infusion devices beyond the assigned devices, the nurse manager/ supervisor should send an email to Jerry Taylor/ Barbara Fahey with the following: (1) indicate the status of the location's assigned pumps (e.g., that all devices are accounted for); (2) provide a justification for additional devices; (3) identify the additional number of infusion devices (brains and channels) desired.
- Guard Rails, the safety system for the pumps, is being coordinated by Chris Chamberlain, Pharmacy. Anesthesia medication is the first family of drugs to be developed. This program has been developed, fine tuned, presented and approve—with one or two minor tweaks—for upload. Upon completion of the anesthesia program, the ICU medications will be developed. Ms. Taylor noted that St. Jude's Hospital has already developed a pediatric oncology patient medication Alaris Medley Guard Rails program, and has shared this program with the Clinical Center. Ms. Woolery-Antill, Nsg, and Mr. Jarosinski, Pharmacy, are developing the pediatric drug family; this will be presented to the Pediatric Care Committee. Ms. Taylor stated that Vanderbilt University, with an 18-month experience with the Alaris Medley IV Pumps, has the highest longevity with these pumps; the Clinical Center may consult with them as our experience develops.
- Ms. Taylor distributed prototype hard plastic storage totes for the infusion pumps. Committee members expressed concern about proper stacking of the storage totes and proper storage of the infusion devices. Mr. Ennis stated that the storage totes were being used in Biomed and seemed to be working well. Committee members stated that the work environment in patient care areas would not be conducive to using the storage totes as intended. The Committee decided against use of the storage totes on patient care units for the time being.
- Ms. Taylor stated that an IV pump SOP his under development. The SOP is multi-departmental in scope. Upon completion the SOP will be circulated.

Temporal Artery Thermometer
Ms. Taylor reported that the temporal artery thermometer trial is complete. The trial findings will be published at a later date. Ms. Taylor commended Ms. Matlock, Nsg., for excellent trial coordination and data management. The trial findings were reviewed by Drs. Lang, Henderson and Masur. Per the physicians' recommendations, the temporal artery thermometer will be used in 13W, 12E/TU, 10D, 9W, 2W/TU, and 2J for a six-month period. The Medical Executive Committee will be appraised of this project prior to providing staff education—to be coordinated by Nursing's Professional Practice Development and to be conducted by the company reps—and initiating the six-month evaluation.

Foley Statlock Trial
Ms. Taylor reported that this trial did not proceed due to an absence of candidate patients. The Committee agreed to table further consideration of this product.

Gemstar Ambulatory Pump Implementation
Ms. Taylor stated that this project is on hold because all of the IV tubing needed for the Gemstar is not yet available from Abbott.

OR Kappler Gown Trial
Mr. Balog reported that Kappler requested DASS to assess a new OR gown. The manufacturing process of the new OR gown was the same as for the current OR gown, but the material was different. Mr. Balog stated that the new OR gown was found unsatisfactory, e.g., the sleeves were ripping and the gown tie fell off. DASS is content with the current OR gown, which is a little heavy but very functional and prevents any fluid strikethrough.

Specimen Transport Carriers
Ms. Taylor distributed a ziplock clear plastic pouch that could be a candidate product for a specimen transport carrier. Ms. Taylor noted that MMD is working with ACS on this project. Updated will be provided to the Committee.

NEW BUSINESS
Regent Medical Biogel® Gloves
Mr. Balog reported a successful trial of the Regent Medical Biogel® Gloves in the operating room. The gloves are latex-free and powder-free. Two Regent Medical Biogel® glove types—the Skinsense™ N Universal and the Skinsense™ PI are recommended to replace the current Allogard latex-free glove line. Reasons include: the gloves are latex-free and powder-free; double-gloving is easy; obvious color change occurs if a tear occurs in the outer glove; tactile sensation is not compromised by use of single-gloving or double-gloving; Biogel has placed the gloves onto Tricare which provides the best discount price. Ms. Taylor noted that prior to Committee approval for the Regent Medical Biogel® Gloves, another trial will be conducted in the Department of Radiology's Interventional Radiology Section.

EHOB Cushion
Ms. Karen Chandler Axelrod and Ms. Barbara Fuller, WOCN, announced that WOCN plans to conduct an evaluation of the EHOB Waffle Cushion as a strategy to help prevent occipital ulcer development. Ms. Axelrod and Ms. Fuller explained that three such ulcers occurred during 2002; a graphic picture of a patient with an occipital ulcer was distributed. Patients at risk for occipital ulcers are very morbid, e.g. they tend to be entubated with mobility issues. Strategy employed thus far to help prevent risk for occipital ulcer development has been distribution of occipital ulcer information via the WOCN newsletter and ongoing inservices to nursing staff on skin care and body position. The EHOB Waffle Cushion system has a combination of non-abrasive, medical grade vinyl, low profile design and static air that substantially reduces pressure and tissue shear. The system has customized inflation via a recessed valve system that allows inflation to be tailored to each patient as needed. The cushion is for single patient use. Each use of the cushion will be closely monitored by WOCN. The Committee approved this evaluation by WOCN.

Univec Sliding Sheath Safety Syringe
The Committee assessed the Univec Sliding Sheath Safety Syringe. The Committee found this product not acceptable for evaluation—the sliding sheath can be easily disengaged from the syringe body and the safety feature activated prior to use of the syringe. These comments will be relayed to Univec.

CRC Wheelchairs
Ms. Taylor announced that CC OD has decided to standardize purchase of future wheelchairs. A recent inventory assessment identified seven different models now in use, with each model needing different components for service and repair. A work group will be assembled, to include representation from RMD and ACS

Hemovacs
Ms. Fahey distributed a summary report of inventory changes made to surgical hemovacs in response to a 2002 ORS. The CC inventory has been expanded to include ‘medium’ and ‘large’ size hemovacs; CC inventory removed one of two extra-large hemovacs (the surgivac, which was the subject of the 2002 ORS), and CC inventory has been expanded to include a replacement hemovac container for nursing units. A Product Update will be distributed when the new inventory is delivered and allocatable.

External Ventricular Drainage System
Ms. Fahey distributed a summary report of inventory changes made in response to a targeted recall of some CSF drainage system products and to a manufacture halt for some CSF drainage system products. The CC has switched out from manufacturer halted items; inservices are being conducted for the new products; the CC Emergency Ventriculostomy Kit component list has been modified.

FYI

CRC Equipment Meetings

Ms. Taylor reported that the current round of CRC equipment meetings is going well and soon will be done. Mr. Eldridge commended the Committee for its ongoing role in promoting quality standardization to the appearance of the CRC and in selection of versatile and high-quality products for the CRC.

Visual Supply Catalog

Ms. Taylor announced delay of inactivation of the MIS CHS Main Order Screens. Inactivation has been planned for early February. However, CC staff now use the MIS CHS Main Order Screens to communicate to CHS about equipment pick-up; the Visual Supply Catalog currently has no pathway in place to communicate to CHS about equipment pick-up. Inactivation is postponed until the Visual Supply Catalog has programming in place to allow communication to CHS about equipment pick-up.

Re-design of Custom Liver Biopsy Kit and Custom O.R. Basin Tray

Ms. Fahey circulated copies of the final approved component list for the CC Custom Liver Biopsy Kit and the CC Custom O.R. Basin Tray.

Select Additions to Inventory

Ms. Taylor announced the availability of select additions to inventory—the Shiley Tracheosoft XLT Extended Digital Length, cuffed, sizes 5, 6, 7, and 8; and the silicone 18 French 3-way x5cc Foley catheter.

OCCURENCES OF NOTE

Ms. Taylor summarized a recent ORS that described defected Abbott Provider Set IV tubing used for the ambulatory pump. The defect seems limited to one lot number. The heat seal between the IV spike and the IV tubing is not in place for all tubing in this lot. Pharmacy identified this problem prior to release of the tubing for patient use. MMD has collected all defective tubing for return to Abbott.

NEXT MEETING:
MARCH 14, 2003 @ 11:00AM, 2C116, MEDICAL BOARD ROOM